## PATENT APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Shinichiro FUJITA et al.

Application No.: New U.S. Application

Filed: July 24, 2003 Docket No.: 116667

For: DATA TRANSFER CONTROL SYSTEM, ELECTRONIC INSTRUMENT, PROGRAM,

AND DATA TRANSFER CONTROL METHOD

## **INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Pursuant to 37 CFR §1.56, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO-1449. Unless otherwise indicated herein, one copy of each reference is attached. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

1. This Information Disclosure Statement is being filed (a) within three months of the U.S. filing date of this non-CPA application, OR (b) before the mailing date of a first Office Action on the merits in the present application. No certification or fee is required.

Respectfully submitted,

James A. Oliff

Registration No. 27,075

Thomas J. Pardini Registration No. 30,411

JAO:TJP/mlo

Date: July 24, 2003

OLIFF & BERRIDGE, PLC P.O. Box 19928 Alexandria, Virginia 22320 Telephone: (703) 836-6400 DEPOSIT ACCOUNT USE
AUTHORIZATION
Please grant any extension
necessary for entry;
Charge any fee due to our
Deposit Account No. 15-0461

| Sheet | 1 | of | 1 |
|-------|---|----|---|
|       |   |    |   |

| Form PTO-1449<br>(REV. 8-83)  |  |  | ATTY DOCKET NO.<br>116667 |                      |                                       | APPLICATION NO. New U.S. Application |     |       |              |  |  |
|---|--|--|---------------------------|----------------------|---------------------------------------|--------------------------------------|-----|-------|--------------|--|--|
| INFOR   | <b>EMATI</b>                                     | ION DISCLOSURE STATEMENT                 | !                         |                      |                                       |                                      |     |       |              |  |  |
|   | (Use s   | several sheets if necessary)             | ļ                         | APPLIC/<br>Shinichir | APPLICANT(S) Shinichiro FUJITA et al. |                                      |     |       |              |  |  |
| ı   |  |  | 1                         | FILING I             | DATE                                  |                                      | GRO | UP    |              |  |  |
|   | U.S. PATENT DOCUMENTS                            |  |                           |                      |                                       |                                      |     |       |              |  |  |
| EXAMINER<br>INITIAL   |  | DOCUMENT NUMBER                          |                           | DATE                 |                                       | NAME                                 |     | CLASS | SUB<br>CLASS |  |  |
|   | 1.   | New U.S. Application Atty Docket: 116658 | 7/24/2003                 |                      | FUJITA et al.                         | -                                    |     |       |              |  |  |
|   | 2.   | New U.S. Application Atty Docket: 116666 | 7/24/2003                 |                      | FUJITA et al.                         |                                      |     |       |              |  |  |
|   | 3.   | New U.S. Application Atty Docket: 116668 | 7/24                      | 4/2003               | FUJITA et al.                         | <b>**</b>                            |     |       |              |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       |              |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       |              |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       | <del></del>  |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       |              |  |  |
|   | <del></del>                                      | FOREIC                                   | SN P/                     | ATENT DC             | CUMENTS                               |                                      |     |       |              |  |  |
|   | <u> </u>   | DOCUMENT NUMBER                          | ,                         | DATE                 | COUNTRY                               |                                      |     | CLASS | SUB<br>CLASS |  |  |
|   | <u>                                     </u>     |  | <del> </del>              |                      |                                       |                                      |     |       | ···          |  |  |
|   | <u> </u>   |  | <del></del>               |                      | <u> </u>                              |                                      |     |       |              |  |  |
|   | <b> </b>   |  | _                         | <del></del>          |                                       | <del></del>                          |     |       |              |  |  |
|   | <del>                                     </del> |  | <u></u>                   |                      |                                       |                                      |     |       |              |  |  |
|   |  | OTHER DOCUMENTS (In                      | 1                         | - 41-au 1            | D to Double                           | - (- )                               |     |       |              |  |  |
|   |  | OTHER DOCUMENTS (Inc                     | Huam                      | ig Autnoi,           | litle, Date, rerun                    | ent Pages, etc.)                     |     |       |              |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       |              |  |  |
|   |  |  | _                         |                      |                                       |                                      |     |       |              |  |  |
|   |  |  |                           |                      | ···········                           |                                      |     |       | - 4          |  |  |
|   |  |  |                           |                      | -                                     |                                      |     |       |              |  |  |
|   | $\vdash$   | Ď.                                       |                           |                      |                                       |                                      |     |       |              |  |  |
|   |  |  |                           |                      |                                       | _                                    |     |       | ~~           |  |  |
| EXAMINER  |  | <u></u>                                  |                           |                      |                                       | DATE CO                              |     |       |              |  |  |
|   |  |  |                           |                      |                                       |                                      |     |       |              |  |  |
| Examiner: Initial if citation considered, whether or not citation is in conformance with M.P.E.P. 609; draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. |  |  |                           |                      |                                       |                                      |     |       |              |  |  |

Date: July 24, 2003